2007-003

LOUISIANA BOARD OF ETHICS DISCLOSURE STATEMENT PURSUANT TO LSA-R.S. 42:1119B(2)(b)

LESTER W. JOHNSON MILL, (Name)		Identificating City & Zip Code)
		carry managed only or carp code,
declare that :	1.	2070100
That this disclosure statement is m on January 1st, <u>2007</u> .	ade pursuant to LSA-R.S. 42:111	9B(2)(b) for the year beginning
(Year)	×2	
	2,	
That I am a D Chief Executive HOSPITAL SERVEY TESTRI	HT NO. IB . LARISH OF	RECHLAND
(Name of Huspital	Service District or Public Trust Authori	ity)
and have served in this capacity si	nce 08 / 02 / 00	
	(Month) (Day) (Yes	r) 5
	3,	¥ ,
That my immediate family membe		12) or his shildean at 19
of children, his brothers, his sisters,	the provent of high with any the se	13) as his children, the spouse
Lie and the contract of the co	, one apoulated of this brothers, tile sp	Custa of ma sisters, mistrarenta
his spouse, and the parents of his s	spouse, is employed by the descri-	ibed Hospital Service Fistre
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NOTE: These disclosure statements are due by January 30th of each year that you have an immediate family member employed by the hospital service district or hospital public trust authority. This Disclosure Statement must be filed even if you filed one last year or at any other time during the year and the information you disclosed has not changed.

If a hospital service district or public trust authority board member or if a chief executive does not have any immediate family members employed by the hospital, then he is not required to file a disclosure statement.

Failure to timely submit a required disclosure statement will result in the imposition of an automatic late fee of \$50.00 per day, with a maximum penalty of \$1,500. IT IS THE RESPONSIBILITY OF EACH HOSPITAL SERVICE DISTRICT OR HOSPITAL PUBLIC TRUST AUTHORITY BOARD MEMBER OR CHIEF EXECUTIVE WHO HAS AN IMMEDIATE FAMILY MEMBER EMPLOYED TO SEE THAT THESE STATEMENTS ARE TIMELY FILED.